

Test Bank for Fundamentals of Nursing 10th Potter

TEST BANK SAMPLE PREVIEW

PUBLISHER

Evolve

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2021

ISBN

9780323677721

RESOURCE TYPE

Test Bank

Chapter 02: The Health Care Delivery System

Potter et al.: Fundamentals of Nursing, 10th Edition

MULTIPLE CHOICE

1. The nurse is caring for a patient whose insurance coverage is Medicare. The nurse should consider which information when planning care for this patient?
 - a. Capitation provides the hospital with a means of recovering variable charges.
 - b. The hospital will be paid for the full cost of the patient's hospitalization.
 - c. Diagnosis-related groups (DRGs) provide a fixed reimbursement of cost.
 - d. Medicare will pay the national average for the patient's condition.

ANS: C

In 1983, Congress established the prospective payment system (PPS), which grouped inpatient hospital services for Medicare patients into diagnosis-related groups (DRGs), each of which provides a fixed reimbursement amount based on assigned DRG, regardless of a patient's length of stay or use of services. Capitation means that providers receive a fixed amount per patient or enrollee of a health care plan. DRG reimbursement is based on case severity, rural/urban/regional costs, and teaching costs, not national averages.

DIF: Understand (comprehension)

OBJ: Compare the various methods for financing health care. TOP: Planning

MSC: Management of Care

2. A nurse is teaching the staff about integrated health care systems. Which model of care should the nurse include in the teaching about seam-less care delivery?
 - a. Affordable Care Act
 - b. Hospital Value-Based Purchasing
 - c. Bundled Payments for Care Improvements
 - d. The patient-centered medical home model

ANS: D

Basically, two types of integrated health care systems are found: an organizational structure that follows economic imperatives (such as combining financing with all providers, from hospitals, clinics, and physicians to home care and long-term care facilities) and a structure that supports an organized care delivery approach (coordinating care activities and services into seamless functioning). The patient-centered medical home model is an example of an integrated health care system that strengthens the physician-patient relationship with coordinated, goal-oriented, individualized care. All the other options are more related to the financial accessibility of health care.

DIF: Understand (comprehension)

OBJ: Explain the structure of the United States health system. TOP: Teaching/Learning

MSC: Management of Care

3. A nurse is teaching a family about health care plans. Which information from the nurse indicates a correct understanding of the Affordable Care Act?
 - a. A family can choose whether to have health insurance with no consequences.
 - b. Primary care physician payments from Medicaid services can equal Medicare.
 - c. Adult children up to age 26 are allowed coverage on the parent's plan.

d. Quality hospital outcome scores are tied directly to patient satisfaction.

ANS: C

The Affordable Care Act ties payment to organizations offering Medicare Advantage plans to the quality ratings of the coverage they offer. If hospitals perform poorly in quality scores, they receive lower payments for services. Quality outcome measures include patient satisfaction, more effective management of care by reducing complications and readmissions and improving care coordination. All individuals are required to have some form of health insurance by 2014 or pay a penalty through the tax code. Primary care physician payments for Medicaid services increased to equal Medicare payments. Implementation of insurance regulations prevents private insurance companies from denying insurance coverage for any reason and from charging higher premiums based on health status and gender.

DIF: Remember (knowledge)

OBJ: Explain the structure of the United States health system. TOP: Teaching/Learning

MSC: Management of Care

4. A nurse is caring for a patient in the hospital. When should the nurse begin discharge planning?
- When the patient is ready.
 - Close to the time of discharge.
 - Upon admission to the hospital.
 - After an order is written/prescribed.

ANS: C

Discharge planning begins the moment a patient is admitted to a health care facility. When the patient is ready may be too late. Close to the time of discharge and after an order is written/prescribed are too late.

DIF: Remember (knowledge)

OBJ: Discuss the role of nurses in different health care delivery settings.

TOP: Planning MSC: Management of Care

5. The nurse is applying for a position with a home care organization that specializes in spinal cord injury. In which type of health care facility does the nurse want to work?
- Secondary acute
 - Continuing
 - Restorative
 - Tertiary

ANS: C

Patients recovering from an acute or chronic illness or disability often require additional services (restorative care) to return to their previous level of function or reach a new level of function limited by their illness or disability. Restorative care includes cardiovascular and pulmonary rehabilitation, sports medicine, spinal cord injury programs, and home care. Secondary acute care involves emergency care, acute medical-surgical care, and radiological procedures. Continuing care involves assisted living, psychiatric care, and older-adult day care. Tertiary care includes intensive care and subacute care.

DIF: Understand (comprehension)

OBJ: Discuss the types of settings that provide various health care services.

TOP: Implementation MSC: Management of Care

6. A nurse provides immunization to children and adults through the public health department. Which type of health care is the nurse providing?
- Primary care
 - Preventive care
 - Restorative care
 - Continuing care

ANS: B

Preventive care includes immunizations, screenings, counseling, crisis prevention, and community safety legislation. Primary care is health promotion that includes prenatal and well-baby care, nutrition counseling, family planning, and exercise classes. Restorative care includes rehabilitation, sports medicine, spinal cord injury programs, and home care. Continuing care is assisted living and psychiatric care and older-adult day care.

DIF: Understand (comprehension)

OBJ: Discuss the types of settings that provide various health care services.

TOP: Implementation

MSC: Health Promotion and Maintenance

7. In order to receive payment for care provided, nursing centers must comply with requirements outlined in what federal legislation?
- Omnibus Budget Reconciliation Act
 - Medicare Act
 - Medicaid Act
 - Affordable Care Act

ANS: A

Nursing centers must comply with the Omnibus Budget Reconciliation Act of 1987 and its minimum requirements for nursing facilities to receive payment from Medicare and Medicaid. The Affordable Care Act ties payment to organizations offering Medicare Advantage plans to the quality ratings of the coverage they offer.

DIF: Understand (comprehension)

OBJ: Describe the components of a quality improvement program.

TOP: Implementation

MSC: Management of Care

8. The nurse is trying to determine risk factors unique to home care patients. What resource should the nurse access?
- Pew Health Professions Commission
 - The Outcome and Assessment Information Set (OASIS)
 - American Nurses Credentialing Center (ANCC) Magnet Recognition Program
 - Hospital Consumer of Assessment of Healthcare Providers and Systems (HCAHPS)

ANS: B

OASIS (the Outcome and Assessment Information Set), includes a group of standardized core assessment items for an adult home care patient. OASIS forms the basis for measuring patient outcomes for the purposes of outcome-based quality. Data items within OASIS include socio-demographic, environmental, support system, health status, functional status, and health service utilization characteristics of a patient (ResDac, 2016). The OASIS assessment tool was designed to gather the data items needed to measure both outcomes and patient risk factors in the home setting. The Pew Health Professions Commission, a national and interdisciplinary group of health care leaders, recommended 21 competencies for health care professionals in the twenty-first century. The Hospital Consumer of Assessment of Healthcare Providers and Systems (HCAHPS) is a standardized survey developed to measure patient perceptions of their hospital experience. The Magnet Recognition Program recognizes health care organizations that achieve excellence in nursing practice.

DIF: Understand (comprehension)

OBJ: Explain the impact of quality and safety initiatives on delivery of health care.

TOP: Assessment MSC: Management of Care

9. An older-adult patient has extensive wound care needs after discharge from the hospital. Which facility should the nurse discuss with the patient?
- Hospice
 - Respite care
 - Assisted living
 - Skilled nursing

ANS: D

An intermediate care or skilled nursing facility offers skilled care from a licensed nursing staff. This often includes administration of IV fluids, wound care, long-term ventilator management, and physical rehabilitation. A hospice is a system of family-centered care that allows patients to live with comfort, independence, and dignity while easing the pains of terminal illness. Respite care is a service that provides short-term relief or “time off” for people providing home care to an individual who is ill, disabled, or frail. Assisted living offers an attractive long-term care setting with an environment more like home and greater resident autonomy.

DIF: Apply (application)

OBJ: Discuss the types of settings that provide various health care services.

TOP: Teaching/Learning MSC: Management of Care

10. A nurse working in a community hospital’s emergency department provides care to a patient having chest pain. Which level of care is the nurse providing?
- Continuing care
 - Restorative care
 - Preventive care
 - Tertiary care

ANS: D

Hospital emergency departments, urgent care centers, critical care units, and inpatient medical-surgical units provide secondary and tertiary levels of care. Patients recovering from an acute or chronic illness or disability often require additional services (restorative care) to return to their previous level of function or reach a new level of function limited by their illness or disability. Continuing care is available within institutional settings (e.g., nursing centers or nursing homes, group homes, and retirement communities), communities (e.g., adult day care and senior centers), or the home (e.g., home care, home-delivered meals, and hospice). Preventive care is more disease oriented and focused on reducing and controlling risk factors for disease through activities such as immunization and occupational health programs.

DIF: Apply (application)

OBJ: Discuss the types of settings that provide various health care services.

TOP: Implementation

MSC: Management of Care

11. A nurse is teaching about the primary focus of community wellness. Which information should the nurse include in the teaching session?
- Coordination of health care services
 - Effective cost containment for services
 - Appropriate service delivery to service population
 - Identification of services needed to address individual needs

ANS: A

Wellness care focuses on the health of populations and their communities rather than simply curing an individual's disease. In wellness care, nurses can help lead communities and health care systems in coordinating resources to better serve their populations. All the remaining options are components of care coordination.

DIF: Understand (comprehension)

OBJ: Discuss the implications that changes in the health care system have on nursing.

TOP: Teaching/Learning

MSC: Management of Care

12. A nurse is using research findings to improve clinical practice. Which technique is the nurse using?
- Performance scores
 - Integrated delivery networks
 - Nursing-sensitive outcomes
 - Utilization review committees

ANS: A

Performance improvement activities are typically clinical projects conceived in response to identified clinical problems and designed to use research findings to improve clinical practice by applying earned scores. Larger health care systems have integrated delivery networks (IDNs) that include a network of facilities, providers, and services organized to deliver a continuum of care to a population of patients at a capitated cost in a particular setting. Nursing-sensitive outcomes are patient outcomes and nursing workforce characteristics that are directly related to nursing care such as changes in patients' symptom experiences, functional status, safety, psychological distress, registered nurse (RN) job satisfaction, total nursing hours per patient day, and costs. Medicare-qualified hospitals had physician-supervised utilization review (UR) committees to review the admissions and to identify and eliminate overuse of diagnostic and treatment services ordered by physicians caring for patients on Medicare.

DIF: Understand (comprehension)

OBJ: Explain the relationship between evidence-based practice and performance improvement.

TOP: Implementation

MSC: Management of Care

13. Which finding indicates the *best* quality improvement process?
- Staff identifies the wait time in the emergency department is too long.
 - Administration identifies the design of the facility's lobby increases patient stress.
 - Director of the hospital identifies the payment schedule does not pay enough for overtime.
 - Health care providers identify the inconsistencies of some of the facility's policy and procedures.

ANS: A

The quality improvement process begins at the staff level, where problems are defined by the staff. It is not identified by administration, the hospital director, or health care providers.

DIF: Apply (application)

OBJ: Describe the components of a quality improvement program.

TOP: Evaluation MSC: Management of Care

14. A nurse is providing home care to a home-bound patient treated with intravenous (IV) therapy and enteral nutrition. What is the home health nurse's primary objective?
- Screening
 - Education
 - Dependence
 - Counseling

ANS: B

Health promotion and education are traditionally the primary objectives of home care, yet at present most patients receive home care because they need nursing care. Screening is preventive care. The home health nurse focuses on patient and family independence. Counseling is through psychiatric care.

DIF: Understand (comprehension)

OBJ: Discuss the role of nurses in different health care delivery settings.

TOP: Planning MSC: Management of Care

15. A nurse hears a co-worker state that anybody could be a nurse since it is so automated with infusion devices and electronic monitoring; technology is doing the work. What is the nurse's *best* response?
- "Technology use has to be combined with nursing judgment."
 - "The focus of effective nursing care is technology."
 - "If it's so easy, why don't you do it?"
 - "That is true in the twentieth century."

ANS: A

In many ways, technology makes work easier, but it does not replace nursing judgment. Technology does not replace your critical eye and clinical judgment. Most importantly, it is essential to remember that the focus of nursing care is not the machine or the technology; it is the patient. Using "why" is not beneficial when communicating with others. Agreeing with the statement furthers misconceptions.

DIF: Apply (application)

OBJ: Explain the impact of quality and safety initiatives on delivery of health care.

TOP: Communication and Documentation

MSC: Management of Care

16. A nurse is completing a minimum data set. Which area is the nurse working?
- Nursing center
 - Psychiatric facility
 - Rehabilitation center
 - Adult day care center

ANS: A

Nurses who work in a nursing center (nursing home or nursing facility) are required to complete a minimum data set on each patient. Minimum data set is not needed for psychiatric, rehabilitation, or adult day care centers. Patients who suffer emotional and behavioral problems such as depression, violent behavior, and eating disorders often require special counseling and treatment in psychiatric facilities. Rehabilitation restores a person to the fullest physical, mental, social, vocational, and economic potential possible. Patients require rehabilitation after a physical or mental illness, injury, or chemical addiction. Adult day care centers provide a variety of health and social services to specific patient populations who live alone or with family in the community. Services offered during the day allow family members to maintain their lifestyles and employment and still provide home care for their relatives.

DIF: Understand (comprehension)

OBJ: Explain the role of nurses in different health care delivery settings.

TOP: Implementation

MSC: Management of Care

MULTIPLE RESPONSE

1. Which government-instituted programs should the nurse include in a teaching session about controlling health care costs? (*Select all that apply.*)
- Professional standards review organizations
 - Prospective payment systems
 - Diagnosis-related groups
 - Third-party payers
 - "Never events"

ANS: A, B, C

The federal government, the biggest consumer of health care, which pays for Medicare and Medicaid, has created professional standards review organizations (PSROs) to review the quality, quantity, and costs of hospital care. One of the most significant factors that influenced payment for health care was the prospective payment system (PPS). Established by Congress in 1983, the PPS eliminated cost-based reimbursement. Hospitals serving patients who received Medicare benefits were no longer able to charge whatever a patient's care cost. Instead, the PPS grouped inpatient hospital services for Medicare patients into diagnosis-related groups (DRGs). In 2011, the National Quality Forum (not a government facility) defined a list of 29 "never events" that are devastating and preventable. Through most of the twentieth century, few incentives existed for controlling health care costs. Insurers or third-party payers paid for whatever health care providers ordered for a patient's care and treatment.

DIF: Understand (comprehension)

OBJ: Explain the various methods for financing health care. TOP: Teaching/Learning

MSC: Management of Care

2. A nurse is teaching the staff about the Institute of Medicine competencies. Which examples indicate the staff has a correct understanding of the teaching? (*Select all that apply.*)
- a. Use informatics.
 - b. Use transparency.
 - c. Apply globalization.
 - d. Apply quality improvement.
 - e. Use evidence-based practice.

ANS: A, D, E

The Institute of Medicine competencies include: provide patient-centered care, work in interdisciplinary teams, use evidence-based practice, apply quality improvement, and use informatics. Transparency is included in the 10 rules of performance in a redesigned health care system, not a competency. While globalization is important in health care, it is not a competency.

DIF: Understand (comprehension)

OBJ: Explain the impact of quality and safety initiatives on delivery of health care.

TOP: Teaching/Learning

MSC: Management of Care

3. A nurse is evaluating care based upon the nursing quality indicators. Which areas should the nurse evaluate? (*Select all that apply.*)
- a. Patient satisfaction level
 - b. Hospital readmission rates
 - c. Nursing hours per patient day
 - d. Patient falls/falls with injuries
 - e. Value stream analysis for quality

ANS: B, C, D

The American Nurses Association developed the National Database of Nursing Quality Indicators (NDNQI) to measure and evaluate nursing-sensitive outcomes with the purpose of improving patient safety and quality care. Nursing quality indicators include the following: hospital readmission rates, nursing hours per patient day, and patient falls/falls with injuries. While every major health care organization measures certain aspects of patient satisfaction, it is not a nursing quality indicator. Value stream analysis is a method that focuses on improvement of processes in a health care institution.

DIF: Apply (application)

OBJ: Discuss opportunities for nursing within the changing health care delivery system.

TOP: Evaluation MSC: Management of Care

4. A nurse is working in a health care organization that has achieved Magnet status. Which components are indicators of this status? (*Select all that apply.*)
- Empirical quality results
 - Structural empowerment
 - Transformational leadership
 - Exemplary professional practice
 - Willingness to recommend the agency

ANS: A, B, C, D

The American Nurses Credentialing Center (ANCC) established the Magnet Recognition Program to recognize health care organizations that achieve excellence in nursing practice. The five components are transformational leadership; structural empowerment; exemplary professional practice; new knowledge, innovation, and improvements; and empirical quality results. Willingness to recommend the hospital/agency is a component of the Hospital Consumer of Assessment of Healthcare Providers and Systems survey.

DIF: Understand (comprehension)

OBJ: Discuss opportunities for nursing within the changing health care delivery system.

TOP: Assessment MSC: Management of Care

MATCHING

A nurse is teaching about the different types of health care model. Match the correct information to the type of health care model the nurse should include in the teaching session.

- Insurance for low-income families
 - Federal insurance for people aged 65 and older
 - Ties payment to organizations offering Medicare Advantage plans to the quality ratings of the coverage they offer
 - Uses diagnosis-related group model
- Prospective payment system (IPPS)
 - Affordable Care Act
 - Medicaid
 - Medicare

1. ANS: D DIF: Understand (comprehension)
OBJ: Compare the various methods for financing health care. TOP: Teaching/Learning
MSC: Management of Care

2. ANS: C DIF: Understand (comprehension)
OBJ: Compare the various methods for financing health care. TOP: Teaching/Learning
MSC: Management of Care
3. ANS: A DIF: Understand (comprehension)
OBJ: Compare the various methods for financing health care. TOP: Teaching/Learning
MSC: Management of Care
4. ANS: B DIF: Understand (comprehension)
OBJ: Compare the various methods for financing health care. TOP: Teaching/Learning
MSC: Management of Care